

# Transfer on Death (TOD) Registration Request

Use this form for non-retirement accounts owned as individuals, joint tenants, or tenants by the entirety only.

rieuse multule now your account is ca	rrently registered:			
Individual Joint	Tenants with Rights of Survivorship	Tenants by Entirety		
Owner's Name first, middle, last			Owner's Social Security Number	
Email Address				
Joint Owner's Name first, middle, las	st		Joint Owner's Social Security Numbe	
Email Address				
OUNT INFORMATION				
	be accompanied by an Applicatior	1)		
	be accompanied by an Applicatior	n)		
	be accompanied by an Application	) Fund or Account #	Fund or Account #	
<ul> <li>New Account (this form must</li> <li>Existing Accounts:</li> </ul>			Fund or Account #	
<ul> <li>New Account (this form must</li> <li>Existing Accounts:</li> <li>Fund or Account #         <ul> <li>I wish to:</li> </ul> </li> </ul>			Fund or Account #	

# **3** BENEFICIARIES

If you are married, please read section 4 on Spousal Waiver. I revoke any prior beneficiary designation. Reserving the right to revoke or change this beneficiary designation, I elect, upon my death, that all fund accounts shall be transferred in equal shares (unless otherwise provided) to each beneficiary designated below.

### Please complete one of the two beneficiary designations below: (individual or trust)

All stated percentages must add up to 100%. If not, transfers shall be made proportionally on the percentages stated.

Individual Beneficiary(ies) Primary Beneficiaries:				
1. Name	Relationship	Date of Birth	Social Security Number	Proportion %
2. Name	Relationship	Date of Birth	Social Security Number	Proportion %
3. Name	Relationship	Date of Birth	Social Security Number	Proportion %

If none of the Primary Beneficiaries survives me, pay any interest I may have under my Account to the following Contingent Beneficiary or Beneficiaries who survive me. Make payment in the proportions specified below (or in equal proportions if no different proportions are specified). If any Contingent Beneficiary predeceases me, his share is to be divided among the Contingent Beneficiaries who survive me in the relative proportions assigned to each such surviving Contingent Beneficiary.

#### **Contingent Beneficiaries:**

1. Name	Relationship	Date of Birth	Social Security Number	Proportion %
2. Name	Relationship	Date of Birth	Social Security Number	Proportion %

IMPORTANT: This Designation of Beneficiary may have important tax or estate planning effects. Also, if you are married and reside in a community property or marital property state (currently Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington or Wisconsin), you may need to obtain your spouse's consent if you have not designated your spouse as primary beneficiary for at least half of your Account. See your attorney or tax professional for additional information and advice.

If additional beneficiaries are desired, please attach a separate sheet listing names, relationships, and birth dates.

Check here if additional and/or Contingent Beneficiary instructions are attached.

Trust or Corporate Beneficiary(ies)
Type of entity:
Trust Corporation Other entity:
ls it tax exempt? Yes
No SSN or Tax I.D #
Please provide the name of the entity. For example, if a Trust, provide the name of the trust and the date of the trust. Example: "John Smith, Trustee of the Smith Family Trust dated December 1, 1995."

# **4** SPOUSAL WAIVER

Residents of AZ, CA, ID, LA, NV, NM, TX, WA and WI \* must sign if spouse is not designated as the primary beneficiary.

As the spouse of the above-named owner of the account, I hereby consent to the designation of the beneficiary(ies) stated above.

Signature of Spouse	
Printed Name of Spouse	Date mm/dd/yyyy
	* The states listed here may change. Please consult your financial or legal advisor.

# **5 SIGNATURES** All registered account owners must sign.

I (We) hereby request that the above-referenced account be registered under the Pear Tree Funds Transfer on Death (TOD) rules for the State of

I (We) hereby reserve the right to change or revoke this instrument, provided that no change or revocation shall become effective until received and accepted by the Pear Tree Funds during my (our) lifetime and in a form acceptable to the Pear Tree Funds. In the event that I (we) move to a jurisdiction that does not permit TOD registration, I (we) shall notify Pear Tree Funds of the effect of such a move has on this account. Pear Tree Funds shall not be responsible for any effect that such a move may have on this account.

Each of the undersigned agrees to indemnify and hold harmless the Pear Tree Funds, each of the Pear Tree Funds-affiliated companies, and each of their respective directors, trustees, officers and employees from and against any and all claims, losses and liabilities (including court costs and reasonable attorney's fees) resulting from the Pear Tree Funds acting on this Transfer on Death Registration Request, maintaining this account, or transferring assets from this account in accordance with this request.

Signature of Owner	Date mm/dd/yyyy	
Signature of Joint Owner	Date mm/dd/yyyy	
<b>■</b> Mailing Address:*	Phone Number:	
Pear Tree Funds	(800)-326-2151	
Attention: Transfer Agent 55 Old Bedford Road, Suite 202 Lincoln, MA 01773	<b>Website:</b>	
*For both standard and overnight Shipping	www.peartreefunds.com	Page of

## **GUIDELINES FOR TOD REGISTRATION FORM**

Transfer on Death is a form of account registration which allows an individual, who is the sole Owner of a security or one of multiple Owners in joint tenancy to register the security as a beneficiary registration. A beneficiary registration provides that, upon the death of all Owners, ownership of the security will transfer to a designated beneficiary without going through any probate or testamentary action. A beneficiary may be cancelled or changed by the Owner(s) without the consent of the beneficiary.

**Please note:** For joint accounts, if one account Owner is deceased, all shares become the surviving account Owner's. Therefore, the surviving account Owner will need to re-register the account to reflect a new Transfer on Death Beneficiary.

## **ELIGIBLE OWNERS**

This Transfer on Death (TOD) registration form can only be used for:

- Sole accounts for natural persons; and
- Natural persons holding the shares as joint owners with rights of survivorship (i.e., Joint Tenants, Tenants with rights of survivorship or Tenants by the Entirety)

TOD Registration is NOT available for:

- Nonnatural persons (e.g., corporations, trusts, associations);
- Tenants in common;
- Community property registrations; or
- Qualified plans

## **ELIGIBLE BENEFICIARIES**

The beneficiary on a TOD registration may be:

- A natural person;
- Another entity such as a trust, corporation or guardianship

Guidelines regarding beneficiaries:

- Custodians under the Uniform Transfers to Minors Act (UTMA) are permissible beneficiaries in a TOD registration;
- Custodians under the Uniform Gifts to Minors Act (UGMA) are NOT permissible beneficiaries in a TOD registration (the UGMA applies to gifts made during the lifetime of the account owner);
- Until the account owner(s) dies, the named beneficiary has no rights in the shares in the TOD account and no instructions can be accepted from, or information provided to, such beneficiary;
- If the beneficiary fails to survive the account owner, the account will be treated as belonging to the owner's estate;
- No designation such as Lineal Descendants or Lineal Descendants Per Stirpes is permitted;
- If the beneficiary survives the owner(s) but is not alive at the time the shares are presented for transfer, the shares become part of the beneficiary's estate.

## \*\*\*\*THESE GUIDELINES ARE SUBJECT TO CHANGE\*\*\*\*